



Village of Monticello
2 Pleasant Street
Monticello, NY 12701
Ph: (845)794-6130
Fax: (845)794-2327

APPLICATION FOR A VARIANCE

Zoning Board Fees:

Basic Application Fee: \$350.00

Escrow Fee: \$1,500.00 due at time of application submission

SEQR Hearing (Scoping): \$350.00

****All Escrow funds must be paid with Bank Certified Checks****

Clean Search of Violations must be submitted with your application from the Building Dept

The Village of Monticello Zoning Board of Appeals meets as needed. There is no monthly meeting schedule unless otherwise noticed by the Village Clerk. Once an application is received by the Village Clerk and all necessary fees are paid, a meeting date is set and all applicants are notified by the Village Clerk. Thank you.

Property Location: Section: _____ Block: _____ Lot(s): _____

Zoning District: _____

Street Address of Proposed Project: _____

Current Property Owners: _____

Address: _____

Contact Phone: (_____) _____
Street/PO Box City State Zip

Are you the current owner of this property? Yes No

Name of Person(s) filling out application: _____

Phone number: (_____) _____

Relation to project: _____

Who will appear before the Zoning Board of Appeals and receive all notices:

Check one only:

Owner Agent Attorney Engineer Surveyor Other

Please note: If you are not the owner of the property please submit a notarized letter from the property owner giving you permission to make decisions and changes in regards to their property. This letter *must* be submitted at the time of application.

NATURE OF VARIANCE: AREA VARIANCE USE VARIANCE

AREA VARIANCE and USE VARIANCE INTERPRETATION OF THE CODE

Village Code Section(s) applicable to property from which variance is sought:

Attach a plan of the subject premises drawn to scale showing the following:

1. Name of record owner(s) of premises and of all adjoining properties
2. Location of existing structures
3. Location of proposed structures
4. Location of all existing and proposed streets or highways and other information pertinent to this application

Reason(s) for request:

1. The strict application of the provisions of the Zoning Law set forth above would result in practical difficulties or unnecessary hardship inconsistent with the general purposes and intent of the Village of Monticello Zoning Law because:

2. The exceptional and/or extraordinary circumstances or conditions applying to the property involved, or to the intended use or development of the property that do not apply generally to other properties or uses in the same Zoning District or neighborhood are:

3. The granting of such variance will not be a substantial detriment to the public interest or to the property or improvements in such district in which the variance is sought and not materially impair the purpose of the Village of Monticello Zoning Law because:

Please be advised:

Incompliance with the Village of Monticello Zoning Ordinance, once the application is accepted by the Zoning Board of Appeals and the Zoning Board sets a Public Hearing date, applicants are required to notify all property owners within 300ft of the above described property by certified mail, return receipt requested, giving notification of said hearing, stating the purpose, date, time and place. Proof of mailing must be submitted to the Chairman at the time of the hearing.

The undersigned hereby requests approval by the Zoning Board of the above identified application.

THE SIGNING OF THIS APPLICATION INDICATES YOUR KNOWLEDGE OF AND RESPONSIBILITY FOR PAYMENT OF ANY APPLICATION FEES AND ESCROW ACCOUNT FOR PROFESSIONAL SERVICES INCURRED BY THE ZONING BOARD IN REVIEW OF THIS APPLICATION, SUCH AS PLANNER, CONSULTANT, ENGINEER, LEGAL, PUBLIC HEARING, AND/OR SITE INSPECTIONS.

Please note: All applicable forms attached must be filled out in their entirety before your application can be submitted to the Village Clerk.

Signature: _____

Title: _____ Date: _____

STATE OF NEW YORK
COUNTY OF SULLIVAN

On the _____ day of _____ in the year of _____ before me came _____ to me known to be the individual(s) described in and who executed the foregoing application for a variance and acknowledged that (that) (he) executed the same.

Notary Public

*****Do Not Write Below This Line*****

FOR OFFICE USE ONLY

Date Paid: _____	Amount Paid: _____	Cash <input type="checkbox"/>	Check <input type="checkbox"/>	No. _____
Clerk Initials: _____	7 Maps of Project Submitted with Application <input type="checkbox"/>			